

<b>PATENT APPLICATION FEE DETERMINATION RECORD</b> Effective December 29, 1999					Application or Docket Number	
<b>CLAIMS AS FILED - PART I</b> (Column 1) (Column 2)					<small>SMALL ENTITY TYPE <input type="checkbox"/> OR OTHER THAN SMALL ENTITY</small>	
FOR		NUMBER FILED	NUMBER EXTRA		<small>RATE</small> <input type="checkbox"/> <small>FEES</small> 345.00 OR X\$ 9= <input type="checkbox"/> X39= <input type="checkbox"/> +130= <input type="checkbox"/> TOTAL <input type="checkbox"/>	
BASIC FEE				<small>RATE</small> <input type="checkbox"/> <small>FEES</small> 690.00 OR X\$18= <input type="checkbox"/> X78= <input type="checkbox"/> +260= <input type="checkbox"/> OR TOTAL <input type="checkbox"/> 690		
TOTAL CLAIMS		<i>17</i>	minus 20 = * minus 3 = *			
INDEPENDENT CLAIMS		<i>3</i>				
MULTIPLE DEPENDENT CLAIM PRESENT						
* If the difference in column 1 is less than zero, enter "0" in column 2						
<b>CLAIMS AS AMENDED - PART II</b> (Column 1) (Column 2) (Column 3)					<small>SMALL ENTITY OR OTHER THAN SMALL ENTITY</small>	
<b>AMENDMENT A</b>	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		<small>RATE</small> <input type="checkbox"/> <small>ADDI- TIONAL FEE</small> OR X\$ 9= <input type="checkbox"/> X39= <input type="checkbox"/> +130= <input type="checkbox"/> TOTAL ADDIT. FEE <input type="checkbox"/>
	Total		* Minus	**	=	
Independent						
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						
<b>AMENDMENT B</b>	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		<small>RATE</small> <input type="checkbox"/> <small>ADDI- TIONAL FEE</small> OR X\$ 9= <input type="checkbox"/> X39= <input type="checkbox"/> +130= <input type="checkbox"/> TOTAL ADDIT. FEE <input type="checkbox"/>
	Total		* Minus	**	=	
Independent						
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						
<b>AMENDMENT C</b>	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		<small>RATE</small> <input type="checkbox"/> <small>ADDI- TIONAL FEE</small> OR X\$ 9= <input type="checkbox"/> X39= <input type="checkbox"/> +130= <input type="checkbox"/> TOTAL ADDIT. FEE <input type="checkbox"/>
	Total		* Minus	**	=	
Independent						
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.						
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."						
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."						
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.						